

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25.)

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **N95000004918 (7)**
1. Corporation Name

**CANADIAN-AMERICAN INTERNATIONAL BUSINESS COUNCIL
OF TAMPA BAY, INC.**



Principal Place of Business Mailing Address
**3030 N. ROCKY POINT DR. W., STE. 280
TAMPA FL 33607-5902** **3030 N. ROCKY POINT DR. W., STE. 280
TAMPA FL 33607-5902**

3. Date Incorporated or Qualified 10/20/1995	3a. Date of Last Report
4. FEI Number 65-0614569	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No	

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip Country	28 Zip Country
24	29 30

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
EKONOMIDES, NICKOLAS C 201 N. FRANKLIN ST., STE. 2350 TAMPA FL 33602	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D ☐ DELETE	1.1 TITLE	D ☐ Change ☒ Addition
NAME	TONER, STEPHEN J	1.2 NAME	Steven A. Baumgarten
STREET ADDRESS	3030 N. ROCKY POINT DR. W., STE. 280	1.3 STREET ADDRESS	4202 East Fowler Avenue, Bsn 3403
CITY-ST-ZIP	TAMPA FL 33607-5902	1.4 CITY-ST-ZIP	Tampa, FL 33620-5500
TITLE	D ☐ DELETE	2.1 TITLE	D ☐ Change ☒ Addition
NAME	STEVENS, GEOFFREY	2.2 NAME	Patrick K. Dugan
STREET ADDRESS	515 W. BAY ST., STE. C	2.3 STREET ADDRESS	453 Edgewater Drive
CITY-ST-ZIP	TAMPA FL 33606	2.4 CITY-ST-ZIP	Dunedin, FL 34698
TITLE	D ☐ DELETE	3.1 TITLE	D ☒ Change ☐ Addition
NAME	GODDARD, D. ANDREW	3.2 NAME	Goddard, D. Andrew
STREET ADDRESS	401 E. JACKSON ST., STE. 2100	3.3 STREET ADDRESS	2604 South Dundee Street
CITY-ST-ZIP	TAMPA FL 33602	3.4 CITY-ST-ZIP	Tampa, FL 33629
TITLE	D ☐ DELETE	4.1 TITLE	D ☐ Change ☒ Addition
NAME	EKONOMIDES, NICKOLAS	4.2 NAME	Cathy Griggs
STREET ADDRESS	201 N. FRANKLIN ST., STE. 2350	4.3 STREET ADDRESS	9525 West Bryn Mawr, Suite 800
CITY-ST-ZIP	TAMPA FL 33602	4.4 CITY-ST-ZIP	Rosemont, IL 60018
TITLE	D ☐ DELETE	5.1 TITLE	D ☐ Change ☒ Addition
NAME	EKONOMIDES, ANTHONY C	5.2 NAME	Raymonu M. Leich
STREET ADDRESS	201 N. FRANKLIN ST., STE. 2350	5.3 STREET ADDRESS	1304 Desoto Avenue, Suite 304
CITY-ST-ZIP	TAMPA FL 33602	5.4 CITY-ST-ZIP	Tampa, FL 33606
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Nick Ekonomides June 11, 1996 (813)228-9508
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #
0011795

CR2E037 (3/96)